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## TRANSMITTAL FORM

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Total Number of Pages in This Submission

Application Number

09/575,161

Filing Date

May 23, 2000

**RECEIVED**

First Named Inventor

Paul Lapstun

Art Unit

2674

AUG 2 0 2004

Examiner Name

Abbas I. Abdulselam

Technology Center 2600

Attorney Docket Number

NPX016US

### ENCLOSURES (Check all that apply)

- Fee Transmittal Form
  - Fee Attached
- Amendment/Reply
  - After Final
  - Affidavits/declaration(s)
- Extension of Time Request
- Express Abandonment Request
- Information Disclosure Statement
- Certified Copy of Priority Document(s)
- Response to Missing Parts/ Incomplete Application
- Response to Missing Parts under 37 CFR 1.52 or 1.53

- Drawing(s)
- Licensing-related Papers
- Petition
- Petition to Convert to a Provisional Application
- Power of Attorney, Revocation
- Change of Correspondence Address
- Terminal Disclaimer
- Request for Refund
- CD, Number of CD(s) \_\_\_\_\_

- After Allowance communication to Technology Center (TC)
- Appeal Communication to Board of Appeals and Interferences
- Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
- Proprietary Information
- Status Letter
- Other Enclosure(s) (please Identify below):

#### Remarks

Email: kia.silverbrook@silverbrookresearch.com  
 Telephone: 61-2-9818-6633  
 Facsimile: 61-2-9818-6711

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name

Paul Lapstun and Kia Silverbrook

Signature

Date

August 16, 2004

### CERTIFICATE OF TRANSMISSION/MAILING

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Paul Lapstun and Kia Silverbrook

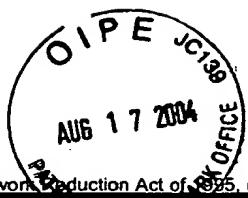
Signature

Date

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# FEE TRANSMITTAL for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

Complete if Known

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May 23, 2000

AUG 20 2004

Technology Center 2600

Attorney Docket No. NPX016US

2674

Abbas L Abduselam

Paul Lapstun

First Named Inventor

Examiner Name

Art Unit

TOTAL AMOUNT OF PAYMENT (\$ 110.00)

Deposit Account

Check  Credit card  Money Order  Other  None Deposit Account:

Deposit Account Number

Deposit Account Name

The Director is authorized to: (check all that apply)

 Charge fee(s) indicated below  Credit any overpayments Charge any additional fee(s) or any underpayment of fee(s) Charge fee(s) indicated below, except for the filing fee

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METHOD OF PAYMENT (check all that apply)

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Small Entity

Fee Code (\$ Fee Code (\$

1051 130 2051 65

1052 50 2052 25

1053 130 1053 130

1812 2,520 1812 2,520

1804 920\* 1804 920\*

1805 1,840\* 1805 1,840\*

1251 110 2251 55

1252 420 2252 210

1253 950 2253 475

1254 1,480 2254 740

1255 2,010 2255 1,005

1401 330 2401 165

1402 330 2402 165

1403 290 2403 145

1451 1,510 1451 1,510

1452 110 2452 55

1453 1,330 2453 665

1501 1,330 2501 665

1502 480 2502 240

1503 640 2503 320

1460 130 1460 130

1807 50 1807 50

1806 180 1806 180

8021 40 8021 40

1809 770 2809 385

1810 770 2810 385

1801 770 2801 385

1802 900 1802 900

Other fee (specify) Terminal Disclaimer

\*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 110.00)

SUBMITTED BY

(Complete if applicable)

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Attorney/Agent

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+61298186633

Signature

Date

August 16, 2004

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